

The Fire and Emergency Medical Services News



New Hampshire Fire Academy



Winter 2009

A Service of New Hampshire Division of Fire Standards & Training and Emergency Medical Services
"Training on the Leading Edge"

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REALITY CHECK AS WE ENTER 2009...

Happy New Year emergency responders of New Hampshire, and I certainly hope it will be a happy one! As I reflect on 2008, while it was not a bad year, there were certainly some speed bumps, or hills in some cases!

New Hampshire participated in the worst natural disaster our generation has seen, that being the ice storm of December. Four hundred thousand (400,000) of the seven hundred thousand (700,000) electrical customers in the state were without power; some for well over a week, some for two!! The response was phenomenal, just as we would expect. We even had the opportunity to see mutual aid from an aspect other than the Fire & EMS response...the power companies. I know I saw trucks bearing Massachusetts, New Jersey, and Michigan plates. The crews from Tennessee stayed at an inn in Milford!

From another perspective, another big disaster this past year was the financial situation felt in our state, our country and throughout the world! If employed, I sincerely hope your status remains that way. There are many lay-offs and other cost reductions being seen globally. I was recently on a conference call with my peers from five other states, during which there was a lot of discussion about doing more with less. A few on the call were being mandated to have unpaid furloughs during the first half of 2009 ranging from one to five days! I know there has been a discussion about deferring raises. I know that unpaid leave of absence is being mandated in other locations, and numerous other cost cutting measures are being put into effect across the state. In my morning newspaper this week, the editorial stated the widespread methods of cost cutting for hospitals, factories, and retailers. The article seemed to infer the main way these companies were coping was to mandate unpaid furloughs. This shows the financial situation is not only being felt in our government, but everywhere.

I wish I had an answer, but I do not. I do make the following pledge to all constituents of the Division of Fire Standards and Training and Emergency Medical Services; we will do everything in our power to assure we represent you and serve you in a proficient and professional manner as we have done for these past years.

I wish the best and safest for you and your families,
Sincerely,

Rick Amason

CALENDAR OF EVENTS

1st Thursday of each month

(Except July-August) NH Fire Standards & Training Commission Meeting, 10:00 a.m.

NHFA

2nd Thursday of each month Tests/Retests: sittings at 9:30 a.m. and

6:30 p.m.; pre-registration required by 1st of month

NHFA

FIRE AND EMERGENCY SERVICES INSTRUCTOR PROGRAMS:

2/2/09-2/13/09 Fire & Emergency Services Instructor II & III

Nashua Fire Department

FIRE INSPECTOR PROGRAMS:

3/20/09-5/1/09 Fire Inspector I

Nashua-Teleconference/Manchester-Physical

1/9/09-1/16/09 Warrants and Citations Module

NHFA

FIREFIGHTER CLASSES:

2/9/09-6/17/09 Firefighter I

IEU/ Madbury Fire Department

1/6/09-5/9/09 Firefighter I

Alton Fire Department

1/15/09-5/21/08 Firefighter I

New London Fire Department

3/26/09-6/25/09 Firefighter II

IEU/ Brentwood Drill Yard

2/9/09-2/11/09 Firefighter III: Confined Space Rescue (Class already full)

NHFA

2/23/09-5/15/09 Recruit School (FFI, FFII & Certified Career Firefighter)

NHFA

HAZARDOUS MATERIALS PROGRAMS:

Watch for future listings

NATIONAL FIRE ACADEMY PROGRAMS:

1/21/09-1/23/09 MGT-313: WMD Incident Mngmt/Unified Command for CBRNE Incidents

Keene State College

2/7/09-2/8/09 F209: Courtroom Preparation & Testimony for First Responders

NHFA

2/17/09-2/19/09 MGT-313: WMD Incident Mngmt/Unified Command for CBRNE Incidents

Loudon

3/24/09-3/26/09 MGT-313: WMD Incident Mngmt/Unified Command for CBRNE Incidents

NHFA

1/10/09-1/11/09 ICS 400: Intermediate ICS

NHFA

1/12/09-1/17/09 Command and Control of Incident Operations

NHFA

SPECIALTY PROGRAMS:

1/20/09-1/29/09 Leadership I

King's Court, Hudson

2/17/09-2/21/09 Leadership II

King's Court, Hudson

3/24/09-3/26/09 Leadership III

King's Court, Hudson

EMS PROGRAMS:

1/7/09-1/21/09 EMT-Basic Refresher Program

NHFA

*NUMEROUS *PEETE Train the Trainer/PEETE Class

*Various Locations across NH

*Please contact Christy Dewey, Program Coordinator for the dates and times at 223-4200 ext. 31013

Please check our website regularly for upcoming programs at <http://www.nh.gov/safety/divisions/fstems/training/schedtrdates.html>

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CPAT 2009 Dates and Thanks

To all Instructors and Departments, thank you for a successful 2008 Entrance Testing outcome! Your efforts, support and input is what **keeps** the testing process a quality operation!

If you would, please put the following dates aside for 2009:

June 15, 16, 17, 18, and 19: Orientation for CPAT at the Manchester Armory

August 31st and September 1st: CPAT Written Test at the NH Fire Academy

September 3,4,7,8,9, and 10: CPAT testing at Armory

The application opening and closing dates for candidates are being formulated and should be announced in the near future. We are anticipating these dates to open sometime in the beginning of February and close early to mid April.

Department Heads, please watch the mail for the Department Agreement requesting assistance for the 2009 testing, and information on how you want the final list sent to you!

If you have any needs, comments or input please give Scott Merrill a call at 617-510-8193, or at the Academy.

New Year's Resolutions

– Tim Robinson, Program Coordinator

Most likely this article will reach after the holidays, at the beginning of the New Year. Most of us make New Year's Resolutions to get in shape, spend more time with the family or spend our money more wisely. Of course these are excellent things to do that will improve your life. But have you ever considered making some **professional** New Year's Resolutions? Perhaps you should use this time each year to create some goals and reflect on how you do your job.

My first suggestion is promise yourself (or better yet your kids!) you will **wear your seatbelt**. Departments and agencies can make all the rules in the world, but when comes down to it, you must make the choice to make yourself safer. According to the US Fire Administration, since 1984, Motor Vehicle Collisions (MVCs) have accounted for between 20 and 25 percent of firefighter fatalities annually. More firefighters are killed in tanker collisions than in engines and ladders combined. About 27 percent of fatalities killed in MVCs were ejected from the vehicle at the time of the collision; only 21 percent of firefighters were reportedly wearing their seatbelts prior to the collision. The evidence is compelling as to why you should wear your seatbelt, and most likely all of you reading this have seen first hand the tragic results of someone that was not wearing one.

My second suggestion is to take what is most likely a yearly personal goal and make it a professional one, too. **Develop a health and fitness plan for yourself**. The National Fire Protection Association reported 44% (440/1006) of on-duty firefighter fatalities during the ten-year period (1995-2004) were due to sudden cardiac death. The US Fire Administration reports that 38% of fatalities on emergency medical calls are the result of heart attacks. I feel someone could accuse me of being a hypocrite after reading this; I too will make this one of my resolutions.

My third resolution suggestion is to **educate, train, drill or practice**. Whether on fire or emergency medical calls many of your skills that are critical to your patient's life or your own are the ones that you use the least. Your skills are perishable and you need continually to exercise them or they will fade away. Review equipment or procedure with other members of the department. Participate in training drills and exercises whenever possible. Take a class to enhance and expand your knowledge in an area, or areas, that you feel a bit rusty. The most important thing to remember is that you are in charge of yourself and need to take the initiative to maintain and better your skills.

So there you have it, three suggestions to help make a better you for the New Year. Hopefully these are resolutions that you will stick with for the entire year. Better yet, they will become a habit and stick with you the remainder of your career in emergency services. Don't be one of those people that buys the proverbially annual gym membership in January and stops going by the end of March. Find a buddy that will gently remind you when you're slacking and offer to do the same for them. Have a Happy and Safe 2009.

EMERGENCY CARE AND SAFETY INSTITUTE: FIRST AID AND CPR/AED UPDATE

-CHRIS ROUSSEAU

Our transition to the Emergency Care and Safety Institute or ECSI, for first aid and CPR/AED, has been nothing less than a success to this point. In a short period of time the Division has been able to establish it's self as an educational training center for all levels of CPR and AED instruction as well as standard first aid. We have reached agreements with ECSI to maintain all of our course paperwork on site and manufacture joint certificates between the Academy and ECSI with both agency logos on them. This drastically reduces the amount of administrative time it takes to input and produce certificates for students who complete a CPR or first aid course.

We have hosted a number of first aid and CPR instructor courses and successfully transitioned more than 25 new instructors into the organization who can now teach these programs for the academy. We have also come to an agreement with ECSI that allows us to utilize our own paperwork process and forms. This means that our instructors do not have to learn a separate process or new forms in order to teach these programs, instead, they can utilize the forms and documents that they are all ready familiar with.

The Division is also taking the appropriate steps to fully integrate the ECSI family of programs into the new Firefighter I and II curriculum that will be introduced after the first of the year. Once the new curriculum has been completely rolled out across the State of New Hampshire, all Firefighter I programs will contain the ECSI professional Rescuer CPR/AED program (8 hours) and the ECSI Standard First Aid course (4 hours) which will satisfy the NFPA 1001 requirements for first aid training.

The old "Emergency First Care" program will effectively be replaced by the standard first aid course. This has several benefits for the student to include better tracking of the training module within the student transcript database and a nationally recognized certification for first aid, which the old program could not provide.

These classes can also be utilized on the EMS side of the "house". The CPR certification is recognized by the Bureau of EMS for licensure and will be accepted by the National Registry of EMT's for certification and re-certification every two years as long as you hold a current ECSI Professional Rescuer CPR/AED certificate.

The Division has spent over a year and a half researching these programs and the anticipated effects they would have on the fire and EMS communities. It was only after that, did we make the decision to become a training center with ECSI. All though we anticipate many more benefits from these programs, we know that there may be some small "bugs" to work out here and there. But, we are committed to following through in order to better serve you, the students.



**New Hampshire Fire &
Emergency Medical Services
Committee of Merit
Division of Fire Standards and Training
And Emergency Medical Services
33 Hazen Drive
Concord, New Hampshire 03305-0002**

NEW HAMPSHIRE COMMITTEE OF MERIT AWARD PROGRAM

The New Hampshire Fire Service & EMS Committee of Merit announces its Annual Awards Program, and again requests the support in recognizing outstanding acts of courage by career, call and volunteer fire and emergency medical service personnel of New Hampshire.

This program was initiated in 1986, after the death of Concord Dispatcher Paul Sypek. In his estate, Paul left the original funding and designated a committee to carry out the plan for this recognition. The first annual award ceremony was held in 1987 and, since then, many New Hampshire fire service personnel have been given awards for their heroic actions. The Fall 2005 was the first cooperative event created to recognize both fire and emergency medical service personnel.

WE NEED YOUR INPUT NOW!

There are many fire and EMS personnel throughout the State of New Hampshire who have performed courageous acts that should be recognized. Any events occurring between January 1, 2008 and December 31, 2008 are eligible at this time for presentation at our next awards ceremony in 2009.

NOMINATION PROCEDURES

A typed letter on proper organization letterhead from (a) Chief of Fire Department of designee; (b) head of a recognized fire/emergency service organization or union; (c) Town or City Manager, Mayor, Selectman, etc. The letter is to describe the action and circumstances leading to the action. It must be a detailed report of what happened, including the type of emergency, time of day, date, and a description of conditions which made the event hazardous, dangerous or unusual.

Nominee(s)' name, mailing address, home and work telephone, fire department or organization, and rank must be included in the letter.

All paid, call, and volunteer firefighters or emergency service personnel are eligible; also, awards may be made posthumously.

Include any pertinent newspaper clippings, photographs, or videos, as well as a listing of any other awards the nominee(s) received.

Deadline: **January 30, 2009**

Mail to: NH Fire Service Committee of Merit
Stacey DeVol, Secretary
33 Hazen Drive
Concord NH 03305

Any Questions: Contact Stacey at 603-271-2661 ext. 31008 or stacey.devol@dos.nh.gov

The Great Ice Storm of 2008: The Fire Academy's Response to the Disaster

by Bob Pragoff,

FST/EMS liaison to NH Homeland Security and Emergency Management

Background

In 2007, the NH Division of Homeland Security & Emergency Management (HSEM) asked the Division of Fire Standards & Training and EMS to join with them as a partner in staffing the Emergency Operations Center (EOC) during activations. The Division was already participating in support as the Emergency Medical Services Emergency Support Function (ESF) and had been doing that for some time. The Division's additional role would be EOC Logistics, which has been defined as the facilities support for the EOC itself and the health and welfare of those staffing it. This is broken down even further and encompasses providing physical security for the facility, procuring meals for the staff during activations and also providing shelter in the form of the dormitory for those either working long shifts or during extreme weather when travel home could prove to be unsafe for the staff. This partnership has been proven during the last year by our support during both exercises at the EOC and actual activations such as during the recent flood and tornado events, as well as the Hillary Clinton campaign office hostage situation in Rochester.

The EOC is activated to different levels, depending on the situation at hand. At Level I it is not staffed; the EOC is simply there and ready to be used if needed. Level II is when the EOC is minimally staffed, usually by HSEM employees in order to monitor a developing situation. Level III is when the ESF's are manned by the appropriate agency representatives as needed. This is where our Division's responsibilities begin. Level IV is when the ESF staffing is maintained at the EOC on a round-the-clock basis for the duration of the event.

The December 2008 Ice Storm

On December 11, 2008 an ice storm struck the State of New Hampshire and the EOC was activated to Level II in order to monitor the storm. Little did anyone know that, by the next day, this storm would be described by many as the "worst natural disaster to hit the State" in terms of geographical area covered, number of residents affected, and amount of physical damage combined. Most, if not all, of the responders across the State were also victims of this disaster which certainly added to the magnitude. More than half of the electric customers in the State were without power and 2/3 of the geographical area of the State was affected.

On December 12, 2008 at approximately 9:30 AM, the EOC was activated to Level III which initiated the Divisions' response. The Division's Bureau of EMS reported to the EOC in their ESF role and additionally, the Division provided support by staffing the following positions: Logistics Section Chief, Logistics Support, Main Entrance Security and Dormitory Resident Assistant. Due to the lengthy response & recovery phases of this incident, these positions would remain staffed as needed from 9:30 AM on December 12 until 1:00 PM on December 24, basically 16 hours a day for 12 days.

The Bureau of EMS provided coordination of and support for the State-wide Emergency Medical Services response to the disaster.

Over the course of those 12 days, the Logistics Section coordinated the delivery of meals for over 100 people 3 times a day plus the overnight shifts, housed staff from State and Federal agencies in the dormitory for 10 nights, arranged for the use of classroom space in the dormitory as a staging & deployment point for responders as well as meeting space for Federal response agencies.

As Facility Security, the Division logged secured access for over 150 different people, arranged for secure meeting space within the building and coordinated National Guard escorts for the many State and Federal agency heads who would meet the Governor and his staff at the EOC daily.

As Facility Support, the Division coordinated physical plant maintenance round-the-clock with the Department of Administrative Services and addressed several issues within the building itself, including elevator failures and the lack of proper refrigeration for the large amount of food that was required to support EOC operations.

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In looking back on this disaster, one would have been hard-pressed to come up with an exercise scenario that would have rivaled the actual events that took place, although Operation Granite Frost in December 2007 came close. During the course of the timeline of this disaster, the following actual events occurred that the EOC had to deal with: a severe ice storm that placed a majority of the State in jeopardy followed closely by a 2-day snowstorm that hampered recovery efforts all within view of upcoming holidays; a medical emergency at the EOC itself; a 1.8 magnitude earthquake that was felt in the lower part of the State; and a helicopter crash in a residential neighborhood in Bow.

While everyone in the Division supported the efforts of the EOC in some way, special thanks go to the following for their active participation in the response to this event:

Bureau Chief Sue Prentiss
Bureau Chief Dennis Rosolen
Brenda Marston
Duffy Sarazin

Rachel Frame
Stacey DeVol
June Connor
Cindy Castagnino

Tammy Fortier
Bob Jeffries
Bill Wood
Shawn Jackson

Mike Schnyder
Brad Weillbrenner

FST&EMS LAUNCHES INTO THE TECHNOLOGY AGE

Fully embracing the "Going Green" movement, NHFST&EMS has decided to change to an electronic publication of most of the consistent information we distribute to the public. In the interest of saving time, money and the environment we've posted most of this information on our website (<http://www.nh.gov/safety/divisions/fstems>). We also encourage you to "subscribe" to our email list which will update you with various news tidbits and business. This information includes the Quarterly Newsletter! Simply follow the web address given to you on the last page of the Quarterly Newsletter and sign up to have that information emailed to you!

The entire staff of FST&EMS greatly appreciates your support in switching over from paper to internet cables! The information will always be displayed in a printable format for ease in making a "hard copy" for your own personal records. Thank you, again, for your support.

PHONE NUMBER UPDATE

The main phone number to the Division has changed to 223-4200. Both 271-2661 and 271-4568 have been forwarded to the new main number. These two lines will eventually be disconnected in the future. Please start notifying people you contact daily or otherwise of the new phone number immediately. We will also be faxing and emailing this information out to as many people as possible.

If you would like someone to go directly to the auto-attendant please use 223-4201.

If you would like to check your voice-mail from outside of the Academy please use the following instructions:

Dial 223-4201

Hit * (It will ask for you ID, which is your extension)

Ext number then hit #

Password then hit #

Please let Bureau Chief Jeffrey Phillips (x31004) know if you have any questions.

Lidocaine for Pain Control of Intraosseous Infusion

Clay Odell, EMTP, RN, Trauma Coordinator

I was recently asked the following question at the North Country EMS Conference: "NH Protocol says after establishing an intraosseous infusion on an awake patient, paramedics can infuse lidocaine into the IO site to decrease the pain of infusing fluids or medications. The protocol specifies 1% lidocaine. Our service doesn't carry 1% lidocaine, but we do carry 2% lidocaine in pre-filled syringes. Can we use the 2% lidocaine for that purpose?"

First, let me state that this is not an advertisement for one particular product, but I'm impressed with the Vidacare EZ-IO device. I've found it extremely easy to use and it enables fluids to be infused pretty well. The product does not move as quickly as an IV, and the fluid needs to be administered under pressure, but I, personally, am okay with that. When I first saw the device I had no qualms about inserting it in an unconscious patient, but worried that it would be really painful to a conscious person. The descriptions in the literature about the pain of insertion indicate that it isn't any more painful than an IV insertion. In fact, you can see people on YouTube doing the procedure on each other (Kids, DON'T try this at home). What does apparently hurt is pushing fluids into the intramedullary space (the space inside the bone that contains the marrow). The manufacturer recommends administering 2% lidocaine to reduce this pain.

NH Protocol 5.12 - Intraosseous Access - states, "If the patient experiences pain during infusion, inject lidocaine into the marrow cavity. Adult: 2 - 5 ml (20 - 50mg) 1% lidocaine / Pediatric: 0.5mg/kg 1% lidocaine." While there isn't a significant difference between 1% and 2% lidocaine, you shouldn't administer a medication that is not specifically referenced in protocol. When brought to the attention of the NH Medical Control Board at the November 20, 2008 meeting, the Board voted to add 2% lidocaine to the protocol.

The 2009 protocol will include language enabling the injection of 1% or 2% lidocaine (adult 20 - 50 mg / pediatric 0.5 mg/kg) into the marrow cavity. This should be followed by a saline flush. And as always, make sure you ask the patient if they're allergic to lidocaine first.

Not long ago I was taking care of a patient entrapped in his car; lengthy extrication, no access to his lower body, and crappy veins. "Hey," I thought, "how about an EZ-IO in the humeral head?" It was a great idea, worked like a charm. By the way, he was unconscious so I didn't worry about giving him the 1% lidocaine that I did not have.

FIRE & EMS NEWSLETTER SUBSCRIPTION REQUEST FORM

AVAILABLE AT NO CHARGE TO NH FIREFIGHTERS AND EMS PROVIDERS

Subscriptions to the quarterly Newsletter are available to NH Firefighters and EMS Providers at no charge simply by completing the request below. If you already receive one, please do not fill out this request unless your Email address or Fire Department has changed. We have changed the distribution to electronic (by email) only to save time and resources.

Sign up to receive the FST&EMS Newsletter and other important information regarding classes, etc. at:

<http://maillist2.nh.gov/mailman/listinfo/fstemsnews>